



**State of Utah**  
**DEPARTMENT OF COMMERCE**  
**Division of Corporations & Commercial Code**

***Central Filing System Effective Financing Statement***  
***CFS-1 Supplemental Sheet***

1. \_\_\_\_\_  
**Debtor Name**

\_\_\_\_\_  
Address City/State/Zip

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
IRS Tax I.D. No.

2. \_\_\_\_\_  
**Debtor Name**

\_\_\_\_\_  
Address City/State/Zip

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
IRS Tax I.D. No.

3. \_\_\_\_\_  
**Secured Party**

\_\_\_\_\_  
Address City/State/Zip

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
IRS Tax I.D. No.

4. \_\_\_\_\_  
**Assignee Name**

\_\_\_\_\_  
Address City/State/Zip

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
IRS Tax I.D. No.

**5. Continued Collateral Description (If needed)**

List specific farm product:	County in Utah where product will be produced:	Crop Year
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**6. Debtor Signature(s)**

\_\_\_\_\_  
\_\_\_\_\_

**7. Authorized Representative of the Secured Party**

\_\_\_\_\_  
Signature

**8. Name and address to whom the stamped copy should be returned (lawyer, assignee, etc.)**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address City State Zip

**FREE! You may visit our Web Site to access this document and other information.**

**Mail In:** PO Box 146705  
Salt Lake City, Utah 84114-6705  
**Walk In:** 160 East 300 South, Main Floor  
**Service Center:** (801) 530-4849  
**Toll Free Number:** (877) 526-3994 (Utah Residents)  
**Fax:** (801) 530-6438  
**Web Site:** <http://www.commerce.utah.gov>